



PLANS OF SAFE DISCHARGE

Presented by:

Anne M. Hall, MD

Assit. Prof of Pediatrics, Section of Neonatology,
University of CO



Children's Hospital Colorado

Matt Holtman, MSW, LCSW

CAPTA Administrator, Division of Child
Welfare



COLORADO

**Office of Children,
Youth & Families**

Division of Child Welfare

SAFE DISCHARGE OF THE SUBSTANCE EXPOSED NEWBORN

- Infants exposed to substances in utero are at high risk
 - increased risk attachment disorders
 - neurodevelopmental and behavioral issues
 - safety concerns due to drug seeking behaviors
- Discharge of any infant exposed to substances, prescribed or illicit, should include careful planning and involvement of a multidisciplinary team.

SAFE DISCHARGE OF THE SUBSTANCE EXPOSED NEWBORN

Timing for discharge

- Physiologic maturity of the infant
- Resolution of medical issues
- Appropriate discharge planning and follow-up have been completed
- Parent/Caregivers have received all necessary education and training

CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA)

- Key federal legislation addressing child abuse and neglect
- Recent amendment 2016 – Comprehensive Addiction and Recovery Act

SAFE DISCHARGE OF THE SUBSTANCE EXPOSED NEWBORN

- Development of Discharge Guidelines to meet CAPTA goals
- Adapted from the 2008 AAP Guidelines from the Committee on Fetus and Newborn regarding the Hospital Discharge of the High-Risk Neonate
- SEN-specific language for hospital Discharge Summary

DISCHARGE PLANNING

Development of comprehensive home-care plan should be completed prior to discharge by a multidisciplinary group

DISCHARGE PLANNING...

- Components of a home-care plan should include:
 - Identification of in-home care givers
 - Formulation of a plan for nutritional and medical care
 - Development of a list of required supplies if applicable
 - Identification of primary care physician (PCP for infants and caregivers)

DISCHARGE PLANNING...

- ...Components of a home-care plan should include:
 - Identification of community resources/treatment programs for caregivers
 - Assessment of the home environment
 - Development of emergency care and transport plan
 - Assessment of financial resources

ARRANGEMENTS FOR FOLLOW-UP

- Verbal communication with the PCP prior to discharge
- Neurodevelopmental follow-up or Early Intervention Referral
- Follow-up for the caregiver should be identified and arranged prior to discharge
 - Follow-up with PCP
 - Follow-up with Social worker/case worker after discharge
 - Follow-up with treatment program and/or counselor if applicable
 - Visiting home nurse if available

PARENT/CAREGIVER EDUCATION

- Parents/caregiver must be present during hospitalization and display competency in cares of the infant prior to discharge.
 - When possible at least 2 caregivers should be identified
- Parents/caregiver must exhibit readiness to assume full responsibility for the infant's care after discharge.
 - Development of an individualized teaching plan
 - Consider creating checklist or outline of tasks

BENEFITS TO THE FAMILY

- The Plan of Safe Care information may be used to assist with screening decisions.
- It may help with locating safe natural supports for the family and prevent unnecessary removals.
- It may provide information of potential caregivers if placement is required.

BENEFITS TO THE FAMILY

- This is a portable plan which ensures all systems are speaking the same language. Discharging hospital, mother and baby's PCP, child welfare, treatment facility or provider all sharing one plan.
- Helps to ensure a focused intervention and accountability for everyone.

NEXT STEPS

- Disseminate statewide to hospitals caring for SEN
- Disseminate statewide to child welfare departments

CONTACT INFORMATION

Anne M. Hall MD

Anne.Hall@childrenscolorado.org

303-257-3906



Children's Hospital Colorado

Matt Holtman, MSW, LCSW

Matt.Holtman@state.co.us

303-866-4897



COLORADO

**Office of Children,
Youth & Families**

Division of Child Welfare

